**ARIZONA FORM** 204

## Application for Filing Extension For Individual and Fiduciary Returns Only USE BLACK OR BLUE INK ONLY.

2005

F	or calendar year 2005 or fiscal year beginning: [M,M D,D	0.12,0.Y,Y	and ending:	[M,M]D	$0_12_10_1Y$	66	
_	FIRST NAME AND INITIAL	LAST NAME			YOUR SOCIAL SECURITY NO.		
YOUR SPOUSE'S FIRST NAME AND INITIAL		LACTNAME			OPOLISTIC COCIAL OF CURITY/NO		
1		LAST NAME		3	SPOUSE'S SOCIAL SECURITY NO.		
	PRESENT HOME ADDRESS - NUMBER AND STREET, RURAL ROUTE APT. NO. DAY		AYTIME PHONE WITH AREA CODE		↑ IMPORTANT ↑ You must enter your SSNs.		
			ME PHONE WITH AREA CODE				
2	_						
	OWN OR POST OFFICE STATE ZIP CO	DDE		FOR DOR	USE ONLY		
3			_				
CHECI	( ONLY ONE BOX:						
Reside	nt Personal Income Tax Forms:						
□ 140 □ 140A □ 140EZ □ 140PTC □ 140ET			88				
_	rt-Year Personal Income Tax Form 140PY						
	nresident Personal Income Tax Form 140NR		<u> </u>		<u> </u>		
L Ar	zona Fiduciary Income Tax Form 141AZ		81		80		
	,						
Select only one:							
Automatic 4-month extension. Return due date August 15, 2006, or fiscal year return due date MM <sub>1</sub> D D <sub>1</sub> 2 0 Y Y <sub>1</sub> for tax year ending MM <sub>1</sub> D D <sub>1</sub> 2 0 Y Y <sub>1</sub> .							
Additional 2-month extension. Return due date October 16, 2006, or fiscal year return due date MMDD12 0 YY, for tax year ending MMDD12 0 YY.							
An Arizona extension cannot be granted for more than six months beyond the original due date of the return.							
Arizona will accept a valid federal extension for the period covered by the federal extension.							
	Tax liability for 2005. You may estimate this amount				1		
2 Arizona income tax withheld during 2005				2			
3 Arizona estimated tax payments for 2005				3			
4 Payments made with previous extension requests for your 2005 return				4			
5 Credits you will claim on your 2005 return. See instructions on back				5			
6 Add lines 2 through 5							
7 Balance of Tax: Subtract line 6 from line 1							
8 Enter the amount of payment enclosed. Make check payable to Arizona Department of Revenue; in				SSN on payment.	8		
You will be liable for the extension underpayment penalty if at least 90 percent of your tax liability disclosed by your return							
has not been paid by the original due date of the return. Interest accrues on any additional tax due from the original due							
date of the return until paid.							
0	If you was a manifestal and automated an addition of the a to file for this tax	vaan ahaali thia hay			۰ 🗆		
9	9 If you were previously granted an extension of time to file for this tax year, <i>check this box</i>						
Enter the date your extension was granted to: [M,M]D,D]2,0,Y,Y]							
	State the reasons why an additional extension is needed:						
Ë	Sign here only if you are requesting an additional two-month extension. You do not have to sign this form if you are requesting an automatic						
ensic	ur-month extension.						
Under penalties of perjury, I declare that I have examined this form including accompanying schedules and statements, and to the be							
ER fine	belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.						
2 H	VOLID GIONATURE						
SIG	YOUR SIGNATURE	DATE					
3E addii	SPOUSE'S SIGNATURE						
PLEASE SIGN HERE luesting additional 2-month e	SPOUSE S SIGNATURE	DATE	DATE				
PL	PAID PREPARER'S SIGNATURE	FIRM'S NAME	F (PRFPARFR'S	IF SELF-EMPLOY	(FD)		
PLEASE SIGN HERE only if requesting additional 2-month extension.	1745 THEITHER O GIOTATIONE	I II WI O NAWI	L (1 INC. AINCING	JELI ELIVII EUT	_5,		
only	PAID PREPARER'S TIN DATE PAID PREPARER'S ADDRESS						
If you are sending a payment with this request, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-2016.  If you are <i>not</i> sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ, 85072-2138.							